



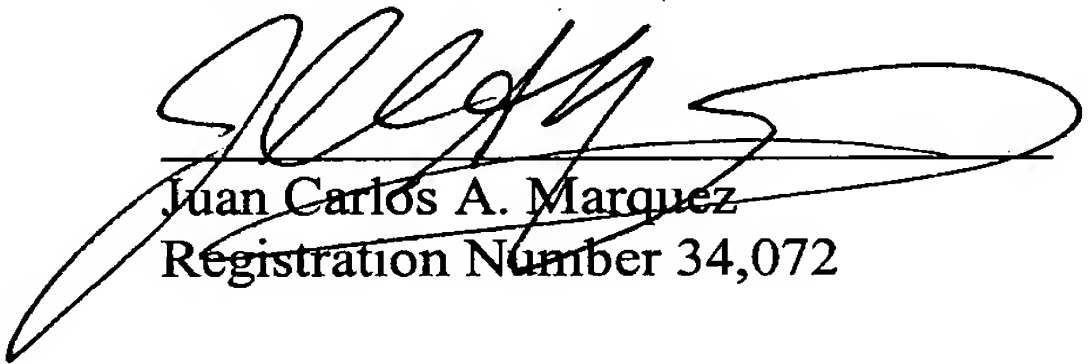
Examiner
Dinh, Tuan T.

- ☒ Petition for 2-month Extension of Time
☐ Information Disclosure Statement
☐ Letter to Draftsperson
☐ ____ sheet of drawings
☒ Request for Continued Examination

- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [x] Checks in the amount of **\$450.00** to cover the 2-month Extension of Time fee, and **\$790.00** to cover the RCE fee are enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

Stanley P. Fisher
Registration Number 24,344



Juan Carlos A. Marquez
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